

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$ 3.08
 Certified Fee 3.50
 Return Receipt Fee (Endorsement Required) 2.50
 Restricted Delivery Fee (Endorsement Required) \$9.00
 Total Postage & Fees \$

Sent To Frank L. Perry, in his Official Capacity as
 Secretary of the
 North Carolina Department of Public Safety
 4201 Mail Service Center
 Raleigh, NC 27699-4201

PS Form 3811, July 2013

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Frank L. Perry, in his Official Capacity as
 Secretary of the
 North Carolina Department of Public Safety
 4201 Mail Service Center
 Raleigh, NC 27699-4201

2. Article Number (Transfer from service label) 7011 1150 0000 4381 2086

COMPLETE THIS SECTION ON DELIVERY

A. Signature X ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail[®] ☐ Priority Mail Express[®]
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, July 2013 Domestic Return Receipt

